



#10/B  
(NIE.)  
LDT  
3-17-04

EIFELD DOCKET NO: SIEM0017UUS

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

IN RE APPLICATION OF: Gradischnig, Klaus      CONFIRMATION NO. 3477

US APPLICATION NO: 09/700,287

PRIORITY DATE CLAIMED: 5/12/1998

DATE OF ENTRY INTO THE NATIONAL STAGE: 11/13/2000

GROUP ART UNIT: 2155

EXAMINER: Bruckart, Benjamin R.

TITLE: Method for signaling in a signaling transfer point

ASSISTANT COMMISSIONER FOR PATENTS

ALEXANDRIA, VA 22313

**RECEIVED**

MAR 16 2004

Technology Center 2100

37 CFR 1.111 AMENDMENT

Sir:

In response to the Office Action mailed December 15, 2003, please amend this application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begin on page 2 of this paper.

**Remarks/Arguments** begin on page 5 of this paper.

Docket No. SIEM0017UUS

IN RE APPLICATION OF: GRADISCHNIG, Klaus

SERIAL NO: 09/700,287

FILED: 11/13/00

FOR: Method for Signaling in a Signaling Transfer Point

ASSISTANT COMMISSIONER FOR PATENTS  
ALEXANDRIA, VA 22313



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MAR 16 2004

Technology Center 2100

**AMENDMENT COVER LETTER  
INCLUDING AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT**

SIR:

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required
- ☐ Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been established by a verified statement previously submitted.
- ☐ Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been established by a verified statement submitted herewith.
- ☐ Additional documents filed herewith:

The Fee has been calculated as shown below:

| CLAIMS                          | CLAIMS<br>REMAINING |  | HIGHEST NUMBER<br>PREVIOUSLY PAID | NO. EXTRA<br>CLAIMS  | RATE      | CALCULATION<br>S |           |
|---------------------------------|---------------------|--|-----------------------------------|--|-----------|------------------|-----------|
| TOTAL                           | 13                  | MINUS  | 20                                | 0  | × \$18 =  | \$0.00           |           |
| INDEPENDENT                     | 2                   | MINUS  | 3                                 | 0  | × \$86 =  | \$0.00           |           |
|                                 |                     | <input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS                   |                                   |  | + \$290 = | \$0.00           |           |
|                                 |                     | TOTAL OF ABOVE CALCULATIONS  |                                   |  |           |                  | \$0.00    |
|                                 |                     | <input type="checkbox"/> Reduction by 50% for filing by Small Entity |                                   |  |           |                  | \$0.00    |
|                                 |                     | <input type="checkbox"/> Recordation of Assignment                   |                                   |  |           | + \$40 =         | \$0.00    |
|                                 |                     | <input type="checkbox"/> Petition for Extension of Time: 1 Month     |                                   |  |           | + \$110 =        | \$0.00    |
|                                 |                     | <input type="checkbox"/> 2 Months                                    |                                   |  |           | + \$420 =        | \$0.00    |
|                                 |                     | <input type="checkbox"/> 3 Months                                    |                                   |  |           | + \$950 =        | \$0.00    |
|                                 |                     | <input type="checkbox"/> 4 Months                                    |                                   |  |           | + \$1,480 =      | \$0.00    |
|                                 |                     | <input type="checkbox"/> Terminal Disclaimer                         |                                   |  |           | + \$130 =        | \$0.00    |
|                                 |                     |  |                                   | <input type="checkbox"/> Information Disclosure Statement Prior to Final |           |                  | + \$180 = |
| <input type="checkbox"/> Other: |                     |  |                                   |  |           |                  |           |
| TOTAL                           |                     |  |                                   |  | \$0.00    |                  |           |

☐ A check including the amount of **\$0.00** is attached.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-2106.

31518

PATENT TRADEMARK OFFICE

Neifeld IP Law, PC  
2001 Jefferson Davis Highway  
Suite 1001  
Arlington, VA 22202

Date

3/15/04

Respectfully Submitted,

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